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PTO/SB/05 (11/00)

Approved for use through 10/31/2002. OMB 0651-0032

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UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No. 24048	
Only for new nonprovisional applications under 37 CFR 1.53(b)		First Inventor or Application Identifier Lowell G. Steffens et al.	
		Title Propane Tank Vending Machine	
		Express Mail Label No. EV 329825081 US	
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents		MAIL STOP PATENT APPLICATION Commissioner for Patents ADDRESS TO: P. O. Box 1450 Alexandria, VA 22313-1450	
1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input checked="" type="checkbox"/> Applicant claims small entity status: (See 37 CFR 1.27)		8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)	
3. <input checked="" type="checkbox"/> Specification [Total Pages 14] (preferred arrangement set forth below)		a. <input type="checkbox"/> Computer Readable Form (CRF)	
— Descriptive title of the Invention		b. Specification Sequence Listing on:	
— Cross References to Related Applications		i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or	
— Statement Regarding Fed sponsored R&D		ii. <input type="checkbox"/> Paper	
— Reference to sequence listing, a table, or a computer program listing appendix		c. <input type="checkbox"/> Statement verifying identity of above copies	
— Background of the Invention			
— Brief Summary of the Invention			
— Brief Description of the Drawings (if filed)			
— Detailed Description			
— Claim(s)			
— Abstract of the Disclosure			
4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 4]			
5. Oath or Declaration [Total Pages 2]			
a. <input checked="" type="checkbox"/> Newly executed (original or copy)			
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) [Note Box 5 below]			
DELETION OF INVENTORS			
i. <input type="checkbox"/> Signed statement attached deleting inventor(s) named in the prior application, see CFR §§ 1.63(d)(2) and 1.33(b).			
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76			
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior Application No. / Prior application information: Examiner Group/Art Unit			
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
19. CORRESPONDENCE ADDRESS			
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Name William J. Clemens, Esq.			
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Name (print/type) William J. Clemens		Registration No. (Attorney/Agent) 26,855	
Signature <i>William J. Clemens</i>		Date January 30, 2004	

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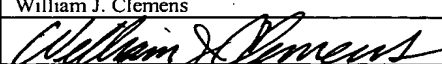
"Express Mail" Mailing Label No. EV 329825081 US Date of Deposit January 30, 2004. I hereby certify that this paper or fee is being deposited in the United States "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop Patent Application, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450

Renee D. East

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FEE TRANSMITTAL For FY 2003 Effective 01/01/2003. Patent fees are subject to annual revision.		Complete if known	
		Application Number	
		Filing Date	
		First Named Inventor	Lowell G. Steffens et al.
		Examiner Name	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Group/Art Unit	
TOTAL AMOUNT OF PAYMENT	(\$ 385)	Attorney Docket No.	24048

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES	
<input checked="" type="checkbox"/> Deposit Account:			
Deposit Acct. No. 13-0005			
Deposit Acct. Name MacMillan, Sobanski, & Todd, LLC			
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<input type="checkbox"/> Charge fee(s) indicated below, except the filing fee, to the above-identified deposit account.			
FEE CALCULATION			
1. BASIC FILING FEE			
Large Fee Code	Entity Fee Code	Small Fee Code	Entity Fee Code
1001	770	2001	385
1002	340	2002	170
1003	530	2003	265
1004	770	2004	385
1005	160	2005	80
SUBTOTAL (1)		\$ 385	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			
Total Claims 20 20** = 0		Fee from 18/9 =	
Independent Claims 2 3** = 0		x 86/43 =	
Multiple Dependent		x 290/145 =	
Large Fee Code	Entity Fee Code	Small Fee Code	Entity Fee Code
1202	18	2202	9
1201	86	2201	43
1203	290	2203	145
1204	86	2204	43
1205	18	2205	9
SUBTOTAL (2)		\$ 0	
** or number previously paid, if greater; for Reissues, see above			
		Other fee (specify)	
		*Reduced by Basic Filing Fee Paid	
		SUBTOTAL (3)	
		\$ 0	

SUBMITTED BY		Complete (if applicable)	
Typed or Printed Name	William J. Clemens	Reg. No.	26,855
Signature		Deposit Account	
	Date January 30, 2004	User ID	

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